## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

10616218

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |              |                               |                     |                  |                                   | SMALL ENTITY TYPE OR |                        |       | OTHER THAN<br>S SMALL ENTITY |                          |  |
|---|---|---|--------------|-------------------------------|---------------------|------------------|-----------------------------------|----------------------|------------------------|-------|------------------------------|--------------------------|--|
| TOTAL CLAIMS  |   |   | 12           |                               |                     |                  | · F                               | RATE                 | FEE                    |       | RATE                         | FEE                      |  |
| FOR   |   |   | NUMBER FILED |                               | NUMBER EXTRA        |                  | Ē                                 | ASIC FEE             | 375.00                 | OR    | BASIC FEE                    | 750.00                   |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | 77 minus 20= |                               | · 57-               |                  |                                   | X\$ 9=               | 513                    | OR    | X\$18=                       |                          |  |
| INDEPENDENT CLAIMS  |   |   | 1 5 mi       | nus 3 =                       | 12                  |                  |                                   | X42=                 | 504                    | OR    | X84≃                         |                          |  |
| MULTIPLE DEPENDENT CLAIM P  |   |   | RESENT       |                               | Ò                   |                  |                                   | +140=                | 301                    | OR    | +280=                        |                          |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |   |   |              |                               |                     |                  | L                                 | TOTAL                | 1392                   | OR    | TÓTAL                        |                          |  |
| CLAIMS AS AMENDED - PART II 9-27-06 (Column 1) (Column 2) (Column 3)                  |   |   |              |                               |                     |                  |                                   | SMALL E              |                        | OR    | OTHER<br>SMALL               |                          |  |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA |                                   | RATE                 | ADDI-<br>TIONAL<br>FEE |       | RATE                         | : ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | • 82                                      | Minus        | ** 7                          | 7 .                 | · 5              |                                   | X\$ 9=               | 125                    | OR    | X\$18=                       |                          |  |
|   | Independent   | . 16                                      | Minus        | ***                           | 15                  |                  |                                   | X42=                 | 100                    | OR    | X84=                         |                          |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |   |              |                               |                     | , L              | +140=                             | •                    | OR:                    | +280= |                              |                          |  |
|   |   |   |              |                               |                     |                  | L                                 | TOTAL<br>DDIT, FEE.  | 125                    | OR    | TOTAL<br>ADDIT. FEE          |                          |  |
| (Column 1) (Column 2) (Column 3)  |   |   |              |                               |                     |                  |                                   |                      |                        |       |                              |                          |  |
| AMENDMENT B   |   | CLAIMS REMAINING AFTER AMENDMENT          |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY        | PRESENT<br>EXTRA |                                   | RATE                 | ADDI-<br>TIONAL<br>FEE | -     | RATE                         | ADDI-<br>TIONAL<br>FEE   |  |
|   | Total   | . 73                                      | Minus        | • 8                           | <i>a</i>            | · ()             | $\Pi$                             | X\$ 9 ₽              |                        | OR    | X\$18=                       | ·                        |  |
|   | Independent   | NITATION OF M                             | Minus        | PENDENI                       | CLAIM               | ]= ()            | $\left\{ \left[ \right] \right\}$ | X425                 | ·                      | OR    | X84=                         |                          |  |
| (1  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                               |                     |                  | <b>,</b> [                        | +140=                |                        | OR    | +280=                        |                          |  |
| 99-77 TO TOTAL ADDIT. FEE ADDIT. FEE  |   |   |              |                               |                     |                  |                                   |                      |                        |       |                              |                          |  |
|   |   | (Column 1)                                |              | (Colu                         |                     | (Column 3)       | , _                               |                      |                        |       |                              |                          |  |
| AMENDMENT C   |   | REMAINING AFTER AMENDMENT                 |              |                               |                     | PRESENT<br>EXTRA |                                   | RATE                 | ADDI-<br>TIONAL<br>FEE |       | RATE                         | ADDI-<br>TIONAL<br>FEE   |  |
|   | Total   | •   | Minus        | **                            |                     | 8                |                                   | X\$ 9=               |                        | OR    | X\$18=                       |                          |  |
|   | Independent   | •   | Minus        | 200                           |                     | =                | 11                                | X42=                 | 1                      | OR    | X84=                         |                          |  |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                               |                     |                  | J  -                              |                      |                        |       | ·+280=                       |                          |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |              |                               |                     |                  |                                   |                      |                        |       |                              |                          |  |
| **  | TOTAL  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **Total OR ADDIT. FEE ON TOTAL ADDIT. FEE  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                               |                     |                  |                                   |                      |                        |       |                              |                          |  |